

P SITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	<i>AS</i>		<i>12/20/94</i>
O.I.P.E. CLASSIFIER	<i>DN</i>	<i>32</i>	<i>1/2/00</i>
FORMALITY REVIEW	<i>M. N.</i>	<i>71628</i>	<i>1-11-00</i>
RESPONSE FORMALITY REVIEW	<i>M. N.</i>	<i>71628</i>	<i>3-30-00</i>

# INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
= ..... Allowed      I ..... Interference  
- (Through numeral)..... Canceled      A ..... Appeal  
+ ..... Restricted      O ..... Objected

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If more than 150 claims or 10 actions  
staple additional sheet here

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